

**APPLICATION FOR CERTIFICATE OF DOMESTICATION  
ARTICLES OF DOMESTICATION**

Wyoming Secretary of State  
The Capitol Building, Room 110  
200 W. 24th Street  
Cheyenne, WY 82002-0020

Phone (307) 777-7311/7312  
Fax (307) 777-5339  
E-mail: corporations@state.wy.us

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Pursuant to the W.S. 17-19-1702 of the Wyoming Nonprofit Corporation Act, the undersigned hereby applies for a Certificate of Domestication and for that purpose hereby submits Articles of Domestication.

1. The name of the corporation is: \_\_\_\_\_

\_\_\_\_\_

2. It is incorporated under the laws of: \_\_\_\_\_

3. The date of its incorporation is: \_\_\_\_\_

and the period of its duration is: \_\_\_\_\_

4. The address of its principal office and the jurisdiction under the laws of which it is incorporated is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. The mailing address where correspondence and annual reports can be sent:

\_\_\_\_\_

\_\_\_\_\_

6. The physical address of its proposed registered office in Wyoming and name of its registered agent at that address is: \_\_\_\_\_

\_\_\_\_\_

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*(The agent must be an individual who resides in this state, a domestic corporation or a not-for-profit domestic corporation or a foreign corporation or not-for-profit foreign corporation authorized to transact business in this state.)*

7. The purpose or purposes of the corporation which it proposes to pursue in the transaction of business in this state.

\_\_\_\_\_

\_\_\_\_\_

8. The names and respective addresses of its officers and directors are:

Office	Name	Address
President	_____	_____
Vice-President	_____	_____
Secretary	_____	_____
Treasurer	_____	_____
Director	_____	_____
Director	_____	_____
Director	_____	_____

*(If additional directors, attach list.)*

9. This corporation is a ☐ public benefit corporation, ☐ mutual benefit corporation, or ☐ religious corporation (check appropriate line).

10. This corporation has members: \_\_\_\_\_ (Yes or No).

11. The corporation accepts the constitution of the state of Wyoming in compliance with the requirement of article 10, section 5 of the Wyoming Constitution.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

*(May be executed by Chairman of Board, President or another of its officers)*

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**Filing Fee: \$25.00**

**Instructions:**

1. The following documents must accompany the application:
  - a. A certified copy of its original articles of incorporation and all amendments thereto or its equivalent basic corporate charter or other authorization, currently certified within six months.
  - b. An original certificate of good standing not more than thirty (30) days old.
  - c. A written consent to appointment manually signed by the registered agent.

**CONSENT TO APPOINTMENT  
BY REGISTERED AGENT**

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I, \_\_\_\_\_, voluntarily consent to serve as the  
registered agent for \_\_\_\_\_  
on the date shown below.

The registered agent certifies that he is: (check one)

- ☐ (a) *An individual who resides in this state and whose business office is identical with the registered office;*
- ☐ (b) *A domestic corporation or not-for-profit domestic corporation whose business office is identical with the registered office; or*
- ☐ (c) *A foreign corporation or not-for-profit foreign corporation authorized to transact business in this state whose business office is identical with the registered office.*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Registered Agent